



THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln No.: 09/818,168

Filed: March 27, 2001

Applicant(s): MUNOZ, Michael A.

Title: **SYSTEM AND METHOD FOR
AUTOMATED PRESCRIPTION
MANAGEMENT**

Art Unit: 3626

Examiner: Gottschalk, Martin A.

Attorney Docket: 85864

Customer No.: 22242

Confirmation No. 1917

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O Box 1450, Alexandria, VA 22313-1450, on this date.

10/20/2005

Date _____

~~Joel H. Bootzin~~

Registration No. 42,343

Attorney for Applicant(s)

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment/reply in the above-identified application.

- ☒ A Petition for Extension of Time for reply within the first month is attached.
- ☒ No additional fee is required.

Fee Calculation For Claims As Amended

	As Amended		Previously Paid For		Present Extra	Rate	Additional Fee
Independent Claims	<u>3</u>	-	<u>4</u>	** =	<u>0</u>	x \$ 200.00 =	<u>\$ 0.00</u>
Total Claims	<u>17</u>	-	<u>25</u>	* =	<u>0</u>	x \$ 50.00 =	<u>\$ 0.00</u>
Fee for Multiple Dependent Claims						\$ 360.00	
** At least 3						Total Additional Fee	<u>\$ 0.00</u>
* At least 20							

- | | | | |
|--------------------------|--|----|------|
| <input type="checkbox"/> | Applicant(s) assert entitlement to Small Entity Status (37 C.F.R. § 1.27), thus reducing the fee by half to: | \$ | 0.00 |
|--------------------------|--|----|------|

- ☐ A check in the amount of \$_____ is enclosed.

Application No. 09/818,168
Amendment dated October 20, 2005
Reply to Office Action of July 18, 2005

☐ Charge \$_____ to Deposit Account No. 06-1135.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required in this application under 37 C.F.R. §§1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 06-1135. Should no proper payment be enclosed herewith, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1135. A duplicate copy of this sheet is enclosed.

October 20, 2005

Date


Joel H. Bootzin

Registration No. 42,343

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